SAMPLE CONTROL FORM & CHAIN OF CUSTODY | **SCF -**

Sampling Information (*to be filled out by the Field Team*)

Collection Team ID:	Collector's Name:	Org:
Latitude:	Location Description:	GPS ☐
Longitude:		
Collection Date:	Collection Time (24hr clock):	Number of Containers: / Contact Dose Rate:
Collection Remarks:		

Sample Type (use only once)

Air	Sampler ID #	Type:		Filter size & Type:
	Date ON:	Time ON:	Date OFF:	Time OFF:
	Start Flow Rate	Stop Flow Rate	**OR** Total Volume:	Unit:
Milk	☐ Cow ☐ Goat ☐ Other		☐ Stored Feed ☐ Pasture ☐ Other:	
	Milking Date:	Milking Time:	Number of Animals	
Ground	Depth of soil sample: cm		Vegetation collected with soil sample? ☐ Yes ☐ No	
	Sample surface area: cm^2		If vegetation in separate container, provide sample #:	
Water	☐ Surface ☐ Ground / Well ☐ Potable / Tap ☐ Other:			
Other	☐ Vegetation ☐ Feed ☐ Produce ☐ Swipe ☐ Other: Describe:			

Sample Receiving (*to be filled out by sample receiving technician*)

Processing Priority:	Duplicate Sample #:	Split Sample #:
Contact Dose Rate		☐ **Contamination Check:** Forms and sample bags surveyed.
Processing Remarks:		
Analysis Requested:		☐ **Sample Preparation Required**, send to sample preparation area before laboratory
Laboratory Assignment:		
Special Instructions:		

Custody Transfer (Signatures)

Relinquished By:	Date/Time	Received By:	Date/Time
Relinquished By:	Date/Time	Received By:	Date/Time
Relinquished By:	Date/Time	Received By:	Date/Time
Relinquished By:	Date/Time	Received By:	Date/Time

Original with Sample **Copy to Data Center** **Copy to Courier** **October 2006**

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SAMPLE CONTROL FORM

Field	Data
Sample Control Number	If no Barcode of Sample Control Number then create one
Collection Team ID	Enter Team Name or Number
Collector's Name	Enter Collectors Name
Org	Enter Collectors Home Organization
Location	Enter Location either GPS-Longitude/Latitude, Description (*i.e.*, Address, Mile Marker, Sector, Distance). If using flags, add Geolocation ID. The recommended format is degrees and decimal degrees. (*i.e.*, Longitude = W 108°.27976).
Collection Date	Enter the Date the Sample was Collected (dd-mmm-yyyy)
Collection Time	Enter the Time the Sample was Collected (Military)
# of Containers	If more than one sample container is collected enter the number
Screening Value	If background permits, enter the Radiation Level with units
Remarks	Enter any pertinent information not already entered (*i.e.*, Grab/Composite Sample, Multiple Analysis Required)
Sample Type	Check the appropriate Sample Type. Enter all available information.
Air Sample	Enter Air Sampler Type, Filter Size and Type, Date On & Off (dd-mmm-yyyy), Time On & Off (Military). Enter either Start & Stop Flow Rate (Corrected) or Total Volume.
Milk Sample	Check Type of Milk Sampled, if Other describe in the remarks. Enter feed type the cattle eat, if Other, describe in the remarks.Enter Milking Date (dd-mmm-yyyy) & Time (Military)
Soil Sample	Enter Depth of soil sample in cm and/or Dimensions of sample area give units. Check if Vegetation Sample was collected with soil sample. If yes enter Vegetation Sample Control Number.
Water Sample	Check Water Sample Collection Area, if Other, describe in the remarks.
Other	Check Other Sample Type, and Enter description of sample and size or volume of sample (*i.e.*, Vegetation 1-gal sealable bags grass, Swipe 100 cm^2)
Processing Priority	Identify Rush Samples. Add Rush labels to sample bags
Split # / Dup #	If Samples are to be split, create duplicate paperwork and assign a new sample number to the dup or split.
Screening Value	Samples are screened for activity as they pass through Sample Receiving. The type of screening depends on the nature of the incident (*i.e.* Nuclear weapon's accident screening conducted with Violinist or FIDLERs). Be sure to note reading and units.
Forms and Sample bags checked for contamination	Check exterior of sample bags and forms for contamination. This can be done with a large area wipe check in the field with a survey instrument. These should be reserved at the hot line.
Sample Preparation Required	Indicate whether the sample must be prepared before being forwarded to the laboratory.
Sample Remarks	Enter discrepancies not resolved during sample receipt.
Analyses Requested	Identify the analyses requested per the Monitoring Plan.
Laboratory Assignment	Enter the laboratories receiving the sample.
Special instructions	Enter any special instructions (*i.e.*, homogenize sample)
Relinquished by	Signed by person releasing custody of the sample - must be done to a person or secured area
Date	Date relinquished
Time	Time (military) relinquished
Received by	Signed by the person receiving the sample - if relinquished to a secure area, the relinquisher must enter the secure location to which the sample is relinquished
Date	Date received or relinquished to a secure area
Time	Time (military) received or relinquished to a secure area